

TACTICAL RESPONSE REPORT/Chicago Police Department

1 DATE OF INCIDENT 11-JUL-2014		TIME 23:37:00		2 ADDRESS OF OCCURRENCE 1533 S CHRISTIANA AVE CHICAGO, IL 60623		3 LOCATION CODE 304		4 DEPT. CODE 1021						
MEMBER INVOLVED	5 POSITION 9161	6 LAST NAME KAHN	7 FIRST NAME BRETT K	8 STAR NO 17785	9 SEX M	10 RACE CODE WHI	11 AGE [REDACTED]	12 WT 702	13 HT 193					
	14 DATE OF APPT 01-AUG-2012	15 EMPLOYEE NO [REDACTED]	16 UNIT & DESIG OF ASSIGNMENT 010 1065C	17 DUTY STATUS On	18 MEMBER INJURED? No	19 MEMBER IN UNIFORM? Yes								
SUBJECT INFORMATION	20 LAST NAME SIMMONS		21 FIRST NAME OCTAVIUS		22 AIT M	23 SEX M	24 RACE BLK	25 DOB 31-JAN-1991	26 HT 600	27 WT 180				
	28 ADDRESS 1800 OAK PARK AVE BERWYN, IL			29 TELEPHONE NO. [REDACTED]	30 WAS SUBJECT ARMED? Yes		31 SUBJECT INJURED? No		32 SUBJECT ALLEGED INJURY? No					
	33 WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]				34 BY WHOM? [REDACTED]		35 CONDITION Injured		36 UNDER MEDICAL CARE No					
	37 CHARGES PLACED 720 ILCS 5.0/31-1-A				38 CASE NO 18932823									
REASON FOR USE OF FORCE (Check all that apply)	39 PASSIVE RESISTER		40 ACTIVE RESISTER		41 ASSAULT/ASSAULT		42 ASSAULT BATTERY		43 ASSAULT WITH FORCE					
	SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION [X] STIFFENED (HEAD MOVING) OTHER []		SUBJECT'S RESPONSE FLED PULLED AWAY [X] OTHER []		SUBJECT'S ACTIONS THREATENED WITH WEAPON OTHER []		SUBJECT'S RESPONSE ATTACK WITH WEAPON ATTACK WITHOUT WEAPON OTHER []		SUBJECT'S ACTIONS USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM WEAPON OTHER []					
WEAPON DISCHARGE INCIDENT	44 MEMBER PRESENCE VERBAL COMMAND ESCORT HOLDS W/SLICK ARM/BAH PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT COCHETICAL WEAPON W/ AUTHORIZATION OTHER []				45 OTHER HAND STRIKE TAKE DOWN - EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CATANE TASER (Probe Discharge) LASER (Contact Stun) TASER (Radar Targeted) TASER (Sonic Displayed) OTHER []		46 ELBOW STRIKE CLOSE HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) OTHER []		47 KNEE STRIKE KICKS IMPACT MUNITION (Describe in Box 40)		48 OTHER []			
	49 COCHETICAL WEAPON AUTHORIZED BY (NAME)				50 ADDITIONAL INFORMATION									
	51 POSITION STANDING		52 STANDING		53 OTHER									
	54 WEAPON TYPE 01 REVOLVER 02 RIFLE 03 SHOTGUN 04 SEMI-AUTO PISTOL 05 CHEMICAL WEAPON 06 LASER (Probe Discharge) 07 OTHER		55 INCIDENT OCCURRED 01 YES 02 NO		56 FIGHTING CONDITIONS 01 Night 02 Daylight 03 Poor Visibility 04 Good Visibility		57 WEATHER CONDITIONS CLEAR							
	58 TASEL UNIT ID NO		59 WEAPON SERIAL NO (Include Letters)		60 CHICAGO GUN REG NO		61 IL FIREARM OWNER ID NO		62 HANDGUIT CLERK CERTIFICATE NO					
	63 SPECIAL WEAPON CERTIFICATE NO		64 PROPERTY INVENTORY NO		65 TYPE OF AMMUNITION USED		66 NO. OF WEAPONS DISCHARGED BY THIS MEMBER		67 TOTAL NO. OF SHOTS MEMBER FIRED					
	68 WHO FIRED FIRST SHOT 01 MEMBER 02 OFFENDER 03 OTHER (SPECIFY)		69 WAS FIREARM RELOADED DURING INCIDENT 01 YES 02 NO		70 NO. OF CARTRIDGES/SHOT SHELLS RELOADED		71 HOW WAS MEMBER'S HANDGUN WORN 01 RT. SIDE (WAIST) 02 LT. SIDE (WAIST) 03 OTHER (SPECIFY)		72 DID MEMBER USE SIGNS 01 YES 02 NO					
	73 HOW WAS MEMBER'S HANDGUN DRAWN 01 STRONG SIDE DRAW 02 CROSS DRAW 03 OTHER (SPECIFY)		74 SPECIFY METHOD OF EQUIPMENT USED TO RESTRAIN		75 DID MEMBER USE SIGNS									
	76 DESCRIBE PROTECTIVE COVER USED (MATTRESS, CLOTHES, CAR FURNITURE ETC)				77 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED 01 0 - 5 FT. 02 5 - 10 FT. 03 10 - 15 FT. 04 OVER 15 FT.									
	78 PERSON, OBJECT & MUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON 01 PERSON 02 OBJECT 03 BOTH 04 UNKNOWN				79 POSITION OF MEMBER DISCHARGING WEAPON 01 STANDING 02 LYING DOWN 03 SITTING 04 KNEELING 05 OTHER (SPECIFY)									
CASE INFO.	NOTIFICATIONS (OC OR TASER INCIDENT): OEMC [X] DESK SGT & W.C. DIST. OF OCCUR				NOTIFICATIONS (FIREARM INCIDENT): OEMC DESK SGT & W.C. DIST. OF OCCUR OP COMMAND DET. DIV									
	Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate crime report.													
SIGNATURES	10 REPORTING MEMBER (Print Name) KAHN, BRETT K		STAR EMPLOYEE NO 17785		SIGNATURE [REDACTED]									
	11 REVIEWING SUPERVISOR (Print Name) LARA, ILDEFONSO J										STAR NO 1607		DATE REVIEWED 17-JUL-2014 19:25:20	
	12 SIGNATURE [REDACTED]										DATE REVIEWED 17-JUL-2014 19:25:20			

Log#1071320
ATT#27

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE AOS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

YES

☒ REFUSED

UNABLE TO INTERVIEW (Specify Reason)

Simmons, after hearing his Constitutional Rights from R/L1 at 0050 Hrs., in a 10th District processing room holding cell, stated that he wanted to go home.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

Upon reviewing the officer's sworn report and interviewing subject Simmons, Use (CB #18932820), this member's actions were in compliance with Department procedures and directives.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO. (ORNO) _____ DATE

78. WATCH COMMANDER/OCIC (Print Name)

GILTMIER, BETH A.

SIGNATURE

DATE COMPLETED

TIME

19-JUL-2014 02:53:21

79. DISTRIBUTION OF ORIGINAL TAR

A TAR PACKET INCLUDING THE TAR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS: PHOTOCOPIES OF

CASE REPORT

ARREST REPORT

SUPPLEMENTARY REPORT

OFFICER SATISFACTION REPORT

10-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

10-D REPORT

OR INITIATION REPORT

80. TOTAL TAR'S THIS EVENT NO.

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